SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Refund: Permit #: Amount Paid: 等5.

I (we) declare that this appli am (are) responsible for the may be a result of Bayfield above described property at	L Secretarial Staff		<b>3</b>	Rec'd for Issuance		☐ Municipal Use				Commercial Use				Residential Use				Proposed Use	Proposed Construction:	Existing Structure: (If permit being applied for is relevant to it)			×		•••		Value at Time of Completion * include donated time &   W	X Non-Shoreland	•	☐ ShorelandC		Section 20	SC 1/4,	•	PROJECT LOCATION	JUSTINA P. W	Authorized Agent: (Person Signature)	Contractor:	Address of Property:	Love molt	TYPE OF PERMIT REQU	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO	Annual population
FAILURE TO OBTAIN A PERMIT OU STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.	L	Other: (ovalain)	-	ORGANIA SEC			☐ Addition	4		(B)								<b>\</b>	on:	f permit being applied fo	A CONTRACTOR OF THE PROPERTY O	Property (July twy 197)	Run a Business on )	Relocate (existing bldg)	Addition/Alteration	New Construction	Project (What are you applying for)		!s Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	Creek or Landward side of Floodplain?	Is Property/Land within 300 feet of River, Stream (incl. intermittent)	Township 43	C 1/4	C C Gov't Lot	Legal Description: (Use Tax	Washlow, its Maryly	\( \int O \( \mathcal{O} \) <b>Authorized Agent:</b> (Person Signing Application on behalf of Owner(s))	A. Alm		Wolf Real Edwar, a	JESTED     LAN	on UNTIL ALL PERMITS HA	Daylleid County comes oc
FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES y accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correc y of all information I (we) am (are) providing and that it will be relied upon by <b>Bayfield County</b> in determining whether to issu this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administ te for the purpose of inspection.	Spicially	rai Cac. (explain)	Special Use: (explain)		> l	Accessory Building (specify)	Addition/Alteration (specify)		Bunkhouse w/ (□ sanitary, or □	with Attached Garage	with (2 <sup>nd</sup> ) Deck	with a Deck	with (2 <sup>nd</sup> ) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)			or is relevant to it)		│ □ Foundation		☐ Basement			# of Stories and/or basement		n 1000 feet of Lake, Pon lf y	of Floodplain? If y	n 300 feet of River, Stre	N, Range 7 W		Lot(s)	Statement)	3	21	Contractor		121	D USE □ SANITARY   Mailir	VE BEEN ISSUED TO APPLIC	OF IGGS CA Was consisted and
ITING CONSTRUCTION WI inned by me (us) and to the be and that it will be relied upon or with this application. I (w	Transfer .	Hein-Letter Assessment Assessment Assessment of the co.	, Billrichash		Alteration (specify)	:	AMPLICATION .	te)	sleeping quarters, or	.age		- Andrews of the second se		The second section of the second seco		shack, etc.)	ture on property)	Proposed Structure		Length: 38					Year Round	☐ Seasonal	Use		escontinue —>	<b> </b>	_	lown ot:	1	M Vol & Page	107	7	Agent Phone: Age	Phone:		1214N Bak Park Ave.	TARY □ PRIVY □ C	D TO APPLICANTS いっぱい HOW BOLHDDUT THIS APPLICATION (visit our	THE PARTY OF THE P
THOUT A PERMIT IS TO MY (our) knowled to be beying the beying the beying the beyond the		LOCATION TO STATE OF THE PARTY	may think								i di		- And the state of	order was every and from the desired of the desired									None	\[ \frac{1}{2} \]	2 ~		# of bedrooms	in a control format of the control o	Distance Structure		Distance Structure	80) t	745	Lot(s) No.	でなるとの	1214 N. Day Pare Aug	ent Mailing Addre	6	イデジン		ONDITIONAL	H1 Indiderion	TARKET TO
WILL RESULT IN PENALTI edge and belief it is true, con in determining whether to is officials charged with admit		West-organizations and the second seco	i class A present request - shorten fort			2 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		A STREET WATER TO THE STREET STREET	□ cooking & food prep facilities)				throat the state of the state o							Width: 30	□ None		15 (	☐ Privy (Pit) or ☐			What Sewer/San Is on the		is from Shorelin		ure is from Shoreline :	101			- 100-781-3500   Rec	Park how cich	Agent Mailing Address (include City/State/Zi	600	Andreas Const.	u Bou I	ONAL USE ■ X SPECIAL USE	S APPLICATION (VISIT OU	the sight of the same o
IES rect and complete. I (we) ac sue a permit. I (we) furthe nistering county ordinances		×					×	( x			( ×	×	×	×	×	×	( ×	Dimensions	Height:	Height:				Vaulted (mir	pecity Type:	Specific Type:	What Type of Sewer/Sanitary System Is on the property?		feet (X-No	et Floor	ls Proper		Willage,	ii	Recorded Document: (i.e. Property Volume 1094 Page(s)	WAIN.	o): <b>/</b> 22/2	Plun	ZZ 8	(c.	SE 🗆 B.O.A.	website www.bayneic	
cknowledge that I (we) r accept liability which to have access to the			7,600+							_							) Footage	Square		74				1200 gallon) Shared	J X Well	City	Water		X No		in Are Wetlands	$\int_{0}^{A \text{ creage}} g(\theta) d\theta \neq 1.8$	North Clust	80(0)	. Property Ownership) Page(s)	Attached Yes No	Written Authorization	Plumber Phone:	301671-47.	CC-SM) 765 178-	Telephone:	dcounty.org/zoning/	Signorture meritanisms

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Authorized Agent:

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DAIY N. Back

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Date

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Hold For Sanitary: Hold Fo	Keys for septic to tent cover:	own, Committee or Board (		Was Parcel Legally Created Was Proposed Building Site Delineated	Granted by Variance (B.O.A.)  Yes X.No Case #:	Is Parcel a Sub-Standard Lot Yes Is Parcel in Common Ownership Xyes Is Structure Non-Conforming Yes	Permit #: 13-0087	Issuance Information (County Use Only) Permit Denied (Date):	(9) Stake or Mark Propi NOTICE: All L For The Construction (	other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.	Setback to Drain Field  Setback to Privy (Portable, Composting)  Fior to the placement or construction of a structure within ten (10) feet of the	Setback to <b>Septic Tank</b> or <b>Holding Tank</b>		Setback from the <b>North</b> Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description	Please complete (1) – (7) above (pr (8) Setbacks: (measure)			Ĺ			(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):
Hold For TBA: V	Took lock	Attached?	Inspected by:	Myes □ No NH		Yes (Deed of Record) Yes (Fused/Contiguous Lot(s)) Yes	Permit Date:	se Only) Sanitary Number: Reason for Denial:	Land Use Permits Expire One Of New One & Two Family D The local Town, Village, (	ad surveyor at the owner's expense. ore than ten (10) feet but less than thin surveyed corner, or verifiable by the D	g)  thin ten (10) feet of the minimum read		160+	50+	1804 Way 1304	Measurement	te (1) — (7) above (prior to continuing) Setbacks: (measured to the closest point)						
Hold For Affidavit:	must by ren	$\square$ No $+$ If $\underline{No}$ they n	by M. Furtal	Were Prop	Previously G	No Mitigation Required No Mitigation Attached	10. 17. 13 10. 17. 13	umber: 467/04 Denial:	Construction, Septic Tank (  (1) Year from the Date of Is welling: ALL Municipalities with, State or Federal agencia	rty (30) feet from the minimum requi	Feet Feet Feet boun	Feet	Feet Feet	Feet	Feet	ement					#### U.S.		Proposed Construction  North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road)  All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) H  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%
Hold For Fees:	removed from	be attached.)		Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance (B.O.A.)	equired □ Yes ૐNo trached □ Yes		# of bedrooms:	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).  NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  The local Town, Village, City, State or Federal agencies may also require permits.	red setback, the boundary line from whic pass from a known corner within 500 fee	dary line from which the setback must be measured must be visib	o Well	Setback from Wetland Setback from 20% Slope Area Elevation of Floodplain	rom the Bank or Bluff	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek	Description	Changes in plans must be approv		/ <sub>*</sub> -		1	DV.WS	Proposed Construction  North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road)  All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%
* Grofauth	Date of Approval:		Zoning District () Lakes Classification () Date of Re-Inspection	ner AYes yed KYes	Case #	Affidavit Required Affidavit Attached		Sanitary Date: 27	Tank (HT), Privy (P), and las not begun. niform Dwelling Code.	t of the proposed site of the struct	from one		->>		vater mark)	M	-77	,	The second secon		25		and/or (*) <b>Privy</b> (P)
avth.	3x		(KKB) (MA)	□ No		□ yes Xino □ yes Qino		1-04	Well (W).	nust be visible from ture, or must be	orner t	WA Feet	Feet Feet		Feet Feet	Measurement	d by the Planning & Zoning Dept.						"

SUBMIT: COMPLETED APPLICATION, STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

np (Escended) CEE.

X 09 2013

Date: Refund: Amount Paid: Permit #: 12 X 13.0089 5-9-13 り上す FILED

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co.

n Are Wetlands ne? Present?	ls Property in Floodplain Zone?	reline : feet	Distance Structure is from Shoreline: $\frac{150}{150}$		Is Property/Land within 300 feet of River, Stream (Ind. Intermittent) Creek or Landward side of Floodplain? If yescontinue →
1010				11918	The state of the s
ンない				>	Section A. Township 4 D N, Range / W
Acreage	Ac Ac	Lot Size		Town of:	
Will River	128/20	なな	27		
3		Subdivision:	Lot(s) No.   Block(s) No.	SM Vol & Page	
Volume 1092 Page(s) 35713	1092 1	Volume .	04-012-2-43-07-23-1 08-201-23	012-2-43-6	Legal Description: (Use lax statement)
Recorded, Document: (i.e. Property Ownership)	Document: (i.e. l			PIN: (23 digits)	
Yes   No	×γe		S. 5450	798-2364 CEW	2000 SWA 715
Written Authorization Attached	Written A	'State/Zip):	Agent Phone: 'Agent Mailing Address' (include Gity/State/Zip):	it Phone: Agent I	ng Application on behalf of Owner(s))
	<b>\</b>		1/4	715-795-254	COIT 15 VR/2
Plumber Phone:	Plum			Contractor Phone: Plumber:	63
			54831	Cable 10:	6640 White Pine Ct Ca
Cell Phone:	Cell F			City/State/Zip:	
	<u>β</u> _	ر 3	Oralesta U. SYL	Color Colors	in Murphy
Telephone:	Telep	Ē	City/State/Zip:	Mailing Address:	wner's Name: Maili
□ OTHER	□ в.о.д. ⊔	☐ SPECIAL USE	☐ CONDITIONAL USE ☐ SPEC	□ PRIVY	PE OF PERMIT REQUESTED 🕩 🛭 LAND USE 🗵 SANITARY
www.bayfieldcounty.org/zoning/asp)		isit our webs	HOW DO I FILL OUT THIS APPLICATION (visit our website	•	NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT
	  -  -	:		Bayrield Co. Zoning Dept.	cks are made payable to: Bayfield County Zoning Department.
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				TOTAL TO SEE THE SWILL DE ISSUED UNTIL ALL TEES AFE DAID.

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¥ Shoreland

 $\hfill\Box$  is Property/Land within 1000 feet of Lake, Pond or Flowage if yes--continue

**A** 

Distance Structure is from Shoreline :

Is Property in Floodplain Zone? ☐ Yes PNo

Present?

□ Non-Shoreland

» Dol-I

	·			えている			Value at Time of Completion * include donated time & material
42200 91X91 X	Property	☐ Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	☐ Addition/Alteration 💢 1-Story + Loft 🗶 Year Round 😥 2	V New Construction	Project (What are you applying for)
	☐ Foundation	□ No Basement	□ Basement	□ 2-Story	1-Story + Loft	✓ 1-Story	# of Stories and/or basement
					X Year Round	☐ Seasonal	Use
		□ None		3	<b>₩</b> 2	_ 1	# of bedrooms
□ None	☐ Compost Toilet	Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type:	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
	<u> </u>	L			₹ Well	☐ City	Water

Existing Structure: (if pe Proposed Construction:

(If permit being applied for is relevant to it)

Length: Length:

Width: Width:

Height: Height:

Proposed Structure	o o	imensions	Footage
Principal Structure (first structure on property)	)	× )	
Residence (i.e. cabin, hunting shack, etc.)	_	× )	
with Loft		×	
with a Porch	^	×	
with (2 <sup>nd</sup> ) Porch	^	× _)	
with a Deck	^	×	
with (2 <sup>nd</sup> ) Deck	^	×	
with Attached Garage	}	x )	
Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	^	×	
Mobile Home (manufactured date)	)	×	
Addition/Alteration (specify) Screen forch	7/ )	× 16)	726
Accessory Building (specify)	(	X )	
Accessory Building Addition/Alteration (specify)	)	× )	
Special Use: (explain)	}	х )	
Conditional Use: (explain)	)	X )	
Other: (explain)	)	× )	
1AY 1/2013 FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES	3		
	(i.e. cabin, hunting shack, etc.) with Loft with a Porch with g <sup>nd</sup> Porch with (2 <sup>nd</sup> ) Porch with (2 <sup>nd</sup> ) Dock with Attached Garage w/ (□ sanitary, or □ sleeping quarters, or □ cooking & food prep facilities) me (manufactured date) w// (□ sanitary, or □ sleeping quarters, or □ cooking & food prep facilities) me (manufactured date) Building (specify) Screen Building Addition/Alteration (specify)  Building Addition/Alteration (specify)  Building Addition/Alteration	Proposed Structure  first structure on property)  t  t  ( , hunting shack, etc.)  t    Porch	## Proposed Structure    first structure on property)

's liste d All Owner must sign  $\underline{or}$  letter(s) of authorization must accompany this application)

Authorized Agent:

(f) yc

Address to send permit

Dages

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5482 If you

sed the pi

owner(s) a letti

on must accompany this application)

Date

Date Ð

Attach
Copy of Tax Statement 
Toperty send your Recorded Deed

Signature of Inspector: Mcdal du	Granted by Variance (B.O.A.)   Case #:   Was Proposed Building Site Delineated   XYes   No       Inspection Record:   Metaal of Inspection: 5- 15-13   Inspection(s) Town. Committee or Board Conditions Attached?	(9) Stake or Mark Proposed Location(s) of Ne  NOTICE: All Land Use Permits Expire C For The Construction Of New One & Two Famil The local Town, Village  Issuance Information: (County Use Only) Permit Denied (Date):  Permit #: 13-0899  Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Permit #: 19-08-18-18-18-18-18-18-18-18-18-18-18-18-18	Please complete (1) – (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)  Description  Description  Description  Description  Measurement  Setback from the Centerline of Platted Road  Setback from the Established Right-of-Way  Setback from the Established Right-of-Way  Setback from the South Lot Line  Setback from the West Lot Line  Setback from the West Lot Line  Setback from the Setback from the East Lot Line  Setback from the West Lot Line  Setback from the West Lot Line  Setback from the Setback from the Setback from the East Lot Line  Setback from the Setback from	30	(1) Show Location of: Proposed (2) Show Location of: Proposed (2) Show Location of (*): (*) Drivew (3) Show: Location of (*): (*) Drivew (4) Show: (5) Show: (6) Show any (*): (*) Well (W.) (6) Show any (*): (*) Lake;
	pected by:   No -If No they need to be attach.	s) of New Construction, Septic Tank (ST), Dr. Expire One (1) Year from the Date of Issuance vo Family Dwelling: ALL Municipalities Are Req vo, Village, City, State or Federal agencies may:  Sanitary Number: 08 – 53 S  Reason for Denial:  Permit Date: 5 - / 7 - / 3  Windows (State of Federal agencies may)  Bould Mitigation Required Mitigation Attached	Measurement  Changes in plans:  TOA Feet  Setback from the Lake (ordinar  TSJ Feet  Setback from the Bank or Bluff  Setback from Wetland  Setback from which the setback must be maner's expense.  Levation of Floodplain  Reet  Setback to Well  Setback to Well  A Feet  Setback from which the setback must be maner's expense.  but less than thirty (30) feet from the minimum required setback, the boundary line erifiable by the Department by use of a corrected compass from a known corner with	the state of the s	gardless of what you are applying for)  Construction  In Plot Plan  ay and (*) Frontage Road (Name Frontage Road)  Structures on your Property  I); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Ho  River; (*) Stream/Creek; or (*) Pond  ds; or (*) Slopes over 20%  Light Level.
Date of Approval / 3	Was Property Surveyed Zoning District (RRB)  Lakes Classification (3)  Date of Re-Inspection:	# of bedrooms:  # of bedrooms:  # of sedrooms:  # of sedrooms:  # of sedrooms:  Affidavit Required	Changes in plans must be approved by the Planning & Zoning Dept.  Changes in plans must be approved by the Planning & Zoning Dept.  Description  Description  Measurement  Setback from the Lake (ordinary high-water mark)  Setback from the Bank or Bluff  Setback from the Bank or Bluff  Setback from Wetland  Setback from Wetland  Setback from Ploodplain  Setback from Ploodplain  Setback to Well  Setback to Well  Setback to Well  Setback from which the setback must be wisible from one previously surveyed corner to the wininum required setback, the boundary line from which the setback must be resible from corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be	orained -60 - notre	Iding Tank (HT) and/or (*) Privy (P)